

Atty Docket No. 018468-000130US

PTO FAX NO.: 703-872-9306

ATTENTION: Examiner ROLLINS, Rosiland S.
TELEPHONE NO.: 703-308-2711

Group Art Unit 3739

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I hereby certify that the following document(s) in re Application of JOYE, JAMES ET AL.,
Application No. 09/978,253, filed October 15, 2001
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Document(s) Attached

1. SB/21 Transmittal Form
2. Amendment (8 pgs)

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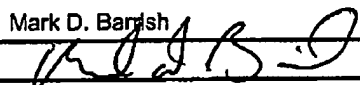
TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
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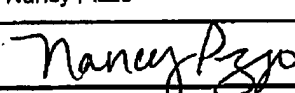
60284999 v1

PTO/SB/21 (04-04)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/978,253
	Filing Date	October 15, 2001
	First Named Inventor	Joye, James
	Art Unit	3739
	Examiner Name	ROLLINS, Rosiland S.
Total Number of Pages in This Submission	Attorney Docket Number	018468-000130US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Townsend and Townsend and Crew LLP Mark D. Barish Reg. No. 36,443	
Signature		
Date	08/16/2004	

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60284991 v1

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Examiner Rollins, Rosiland
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On 16 August 2004 (Monday)

TOWNSEND and TOWNSEND and CREW LLP

By: Nancy Pizzo
NANCY PIZZO

PATENT

Attorney Docket No.: 018468-000130US

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

JOYE, JAMES ET AL.

Application No.: 09/978,253

Filed: October 15, 2001

For: Apparatus and Method for Cryogenic
Inhibition of Hyperplasia

Confirmation No. 4467

Examiner: ROLLINS, Rosiland S.

T.C./Art Unit: 3739

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed June 22, 2004, please enter the following
amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on
page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.